



Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

**School District Claim for
State Reimbursement for
School Bus Transportation**

State ☐
District ☐
County ☐

**DUE
DATES:**

First Semester
February 1 to County Superintendent
February 15 to State Superintendent

Second Semester
May 10 to County Superintendent
May 24 to State Superintendent

COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR SCHOOL BUS TRANSPORTATION:

This claim is for the period beginning _____, 20____ and ending _____, 20____.
month day month day

CERTIFICATION:

The information on this form is complete and accurate to the best of my knowledge.

Date		Signature, Chair, Board of Trustees						
County:		District:					District Level:	
21 Hill		0425 Box Elder Elem					Elementary	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
50	13	1	53	1.57	72	08/22/05	_____	_____
50	13	2	62	1.57	72	08/22/05	_____	_____
50	13	3	55	1.80	84	08/22/05	_____	_____
50	13	4	56	1.80	84	08/22/05	_____	_____
50	13	5	93	1.57	72	08/22/05	_____	_____
50	13	6	44	0.95	12	08/22/05	_____	_____
50	13	7	44	1.57	72	08/22/05	_____	_____



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Date		Signature, Chair, Board of Trustees						
County:		District:					District Level:	
21 Hill		0426 Box Elder H S					High School	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
50	G	1	53	1.57	72	08/22/05	_____	_____
50	G	2	62	1.57	72	08/22/05	_____	_____
50	G	3	55	1.80	84	08/22/05	_____	_____
50	G	4	56	1.80	84	08/22/05	_____	_____
50	G	5	93	1.57	72	08/22/05	_____	_____
50	G	6	44	0.95	12	08/22/05	_____	_____
50	G	7	44	1.57	72	08/22/05	_____	_____



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Date	Signature, Chair, Board of Trustees								
County:	District:						District Level:		
21 Hill		0427 Havre Elem						Elementary	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #	
50	16	1	52.8	1.15	54	07/25/05	_____	_____	
50	16	10	93	1.36	66	07/25/05	_____	_____	
50	16	11	44.8	1.57	72	07/25/05	_____	_____	
50	16	12-16-12B	96	1.57	78	07/25/05	_____	_____	
50	16	12-16-12C	100	1.57	78	07/25/05	_____	_____	
50	16	12-16-3C	58.9	0.95	45	07/25/05	_____	_____	
50	16	12-16-3D	57.6	0.95	45	07/25/05	_____	_____	
50	16	12-16-3E	72.4	0.95	45	07/25/05	_____	_____	
50	16	12A	93	1.57	78	07/25/05	_____	_____	
50	16	2	66.8	1.57	72	07/25/05	_____	_____	
50	16	3B	55.4	0.95	45	07/25/05	_____	_____	
50	16	4	125.2	1.57	72	07/25/05	_____	_____	
50	16	5	73.4	1.57	72	07/25/05	_____	_____	
50	16	6	191.4	1.15	54	07/25/05	_____	_____	
50	16	7	73	0.95	48	07/25/05	_____	_____	
50	16	8	41	1.36	66	07/25/05	_____	_____	
50	16	9	88.6	1.15	54	07/25/05	_____	_____	



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Date	Signature, Chair, Board of Trustees								
County:	District:						District Level:		
21 Hill		0428 Havre H S						High School	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #	
50	A	1	52.8	1.15	54	07/25/05	_____	_____	
50	A	10	93	1.36	66	07/25/05	_____	_____	
50	A	11	44.8	1.57	72	07/25/05	_____	_____	
50	A	12-16-12B	96	1.57	78	07/25/05	_____	_____	
50	A	12-16-12C	100	1.57	78	07/25/05	_____	_____	
50	A	12-16-3C	58.9	0.95	45	07/25/05	_____	_____	
50	A	12-16-3D	57.6	0.95	45	07/25/05	_____	_____	
50	A	12-16-3E	72.4	0.95	45	07/25/05	_____	_____	
50	A	12A	93	1.57	78	07/25/05	_____	_____	
50	A	2	66.8	1.57	72	07/25/05	_____	_____	
50	A	3B	55.4	0.95	45	07/25/05	_____	_____	
50	A	4	125.2	1.57	72	07/25/05	_____	_____	
50	A	5	73.4	1.57	72	07/25/05	_____	_____	
50	A	6	191.4	1.15	54	07/25/05	_____	_____	
50	A	7	73	0.95	48	07/25/05	_____	_____	
50	A	8	41	1.36	66	07/25/05	_____	_____	
50	A	9	88.6	1.15	54	07/25/05	_____	_____	



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Date		Signature, Chair, Board of Trustees						
County: 21 Hill		District: 0445 Cottonwood Elem					District Level: Elementary	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
100	57	21-57-1	113	0.95	18	08/23/05	_____	_____
100	57	21-57-2	151	0.95	24	08/23/05	_____	_____



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Date	Signature, Chair, Board of Trustees							
County:	District:						District Level:	
21 Hill	1207 Rocky Boy Elem						Elementary	

Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
80	87J	1 Azure	35.2	1.80	84	08/23/05	_____	_____
80	87J	2 Haystack	29.2	1.57	72	08/22/05	_____	_____
80	87J	3 Parker	20.6	1.80	84	08/22/05	_____	_____
80	87J	4 Parker Canyon	32.6	1.15	59	08/22/05	_____	_____
80	87J	5 Duck Creek	117.2	1.80	84	08/22/05	_____	_____
80	87J	6 Lower Road	50	1.57	72	08/22/05	_____	_____
80	87J	7 Bonneau	88	1.57	71	08/22/05	_____	_____
80	87J	8 Sp Ed	40	0.95	12	08/22/05	_____	_____



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County:	District:	District Level:
21 Hill	1229 Rocky Boy H S	High School

Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
20	87L	1 Azure	35.2	1.80	84	08/23/05		
20	87L	2 Haystack	29.2	1.57	72	08/22/05		
20	87L	3 Parker	20.6	1.80	84	08/22/05		
20	87L	4 Parker Canyon	32.6	1.15	59	08/22/05		
20	87L	5 Duck Creek	117.2	1.80	84	08/22/05		
20	87L	6 Lower Road	50	1.57	72	08/22/05		
20	87L	7 Bonneau	88	1.57	71	08/22/05		
20	87L	8 Sp Ed	40	0.95	12	08/22/05		



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District	<input type="checkbox"/>
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County:	District:	District Level:	
21 Hill	1233 North Star Elem	Elementary	

Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
50	99	1	96	0.95	21	08/05/05	_____	_____
50	99	1A	50.8	0.95	21	08/05/05	_____	_____
50	99	2	104.6	0.95	21	08/01/05	_____	_____
50	99	3	27.4	1.57	70	08/01/05	_____	_____



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Date		Signature, Chair, Board of Trustees						
County:		District:					District Level:	
21 Hill		1234 North Star HS					High School	
Percentage	District #	Route #	Miles Per Day	Rate Per Mile	Capacity	Inspection	Days Operated	Bus Driver's Social Security #
50	M	1	96	0.95	21	08/05/05	_____	_____
50	M	1A	50.8	0.95	21	08/05/05	_____	_____
50	M	2	104.6	0.95	21	08/01/05	_____	_____
50	M	3	27.4	1.57	70	08/01/05	_____	_____